

MONTANA STATE PRISON HEALTH SERVICES OPERATIONAL PROCEDURE

Procedure No.: MSP HS B-01.0	Subject: INFECTION CONTROL PROGRAM	
Reference: NCCHC Standards for Health Services in Prison,		
2014; Center for Disease Control Guidelines; OSHA and		Page 1 of 4 and no attachments
Environmental Protection Agency Standards; MAXAIR Protocol;		
DOC 1.3.35, Bloodborne Pathogens Ex		
Hepatitis B Immunization; HS B-01.1, Standard Precautions; HS		
B-01.2, Bloodborne Pathogens; HS B-01.3, Rapid HIV Testing;		
HS B-01.4, Disease Prevention /TB Control Plan; HS B-01.5,		
Decontamination of Medical Equipment; HS B-01.7, Infirmary		
Food Service Sanitation; HS E-13.0, D	ischarge Planning	
Effective Date: April 8, 2013		Revised: June 1, 2017
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I. PURPOSE

To track the incidence of infectious and communicable disease among inmates through monitoring and surveillance; promote a safe and healthy environment; prevent the incident and spread of disease; assure that infected inmates receive prompt care and treatment; and assure the completion and filing of all applicable reports consistent with local, state, and federal laws and regulations.

II. DEFINITIONS

<u>Bloodborne Pathogen Exposure Reduction</u> – Describes staff actions to be taken to eliminate or minimize exposures to pathogens.

<u>Health Care Unit Services</u> – The full complement of facility health care services that range from infirmary care to sick call, including appropriate referrals.

<u>Standard Precautions</u> – Designed to reduce the transmission of pathogens from moist body substances by applying them to all patients receiving care, regardless of their diagnosis or presumed infection status.

<u>Medical Isolation</u> – Housing an inmate in a separate room with a separate toilet, hand washing facility, soap, and single-service towels, with appropriate accommodations for showering.

NCCHC - National Commission on Correctional Health Care.

III. PROCEDURE

A. General Requirements

- 1. Health care staff will provide prompt care and treatment to inmates afflicted with infectious or communicable diseases, including providing information about disease transmission and methods to prevent future infection of self or others.
- 2. The designated Infection Control RN is responsible for monitoring, surveillance, and appropriate reporting of infectious and communicable diseases in an effort to minimize their occurrence in accordance with state and federal guidelines.

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- 3. Health care staff will:
 - a. use "Standard Precautions" when providing inmate health care in accordance with *HS B-01.1, Standard Precautions*;
 - b. health care staff will use Personal Protective Equipment that must be readily available for routine and emergency care in accordance with *HS B-01.2*, *Bloodborne Pathogens*; and
 - c. health care staff will follow procedures to account for equipment and attend annual in-service training on its use coordinated by the Infection Control RN.

B. Infection Control Program

- 1. The designated Infection Control RN will be responsible for the Infection Control Program at Montana State Prison and will have overall responsibility for training, developing procedures and ensuring compliance.
- 2. Health care staff assigned to the Martz Diagnostic and Intake Unit will screen inmates for tuberculosis and acute infectious disease according to guidelines established by the DOC Medical Director in accordance with NCCHC guidelines and MSP HS B-01.4.
- Health care staff will make immunizations available to inmates without adequate immunizations
 or whose medical conditions would be severely compromised if they are infected with vaccine
 preventable diseases.
- 4. Health care staff will offer an influenza vaccine program to inmates identified at risk for complication of influenza. In the event enough vaccine is available, the vaccine will be offered to the remaining inmate population.
- 5. Health care staff will provide HIV and Hep C counseling, education, and testing to all inmates. Inmates will then have the option to opt out of HIV and Hep C testing. All issues addressing HIV shall be in accordance with *HS B-01.3 Rapid HIV Testing and Hep C Testing*.
- 6. Tuberculosis will be handled as follows:
 - a. the Infection Control RN will coordinate tuberculosis screening for staff and inmates annually as outlined by the *HS B-01.4*, *Disease Prevention TB Control Plan*;
 - b. all employees are required to receive a two-part TB skin testing (Mantoux) upon employment and complete the DOC Clinical Services Division Annual Tuberculosis Screening Form for Staff annually thereafter and if indicated complete further testing; and
 - c. health care staff will address all issues relating to tuberculosis in accordance with *HS B-01.4 Disease Prevention-TB Control Plan*.
- 7. The Infection Control RN, in conjunction with Human Resources staff, will ensure that Department employees are offered Hepatitis B vaccination in accordance with *DOC 1.3.35*, *Bloodborne Pathogens Exposure Control Plan & Hepatitis B Immunization*.
- 8. MSP health care providers will follow the treatment guidelines that have been established by the Department Medical Director in healthcare standard operating procedure, *Hepatitis C Management*.
- 9. All inmates will also be tested for syphilis, gonorrhea, and chlamydia at intake. All inmates will be given the option to opt out. Health care providers will treat inmates presenting with acute or chronic infectious or communicable diseases in accordance with the 2014 CDC Sexually

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Transmitted Diseases Treatment Guidelines. Providers will provide information to inmates about disease transmission and methods to prevent future infection of self or others.

- 10. When a physician orders an inmate to be isolated for an infectious disease, health care staff will follow:
 - a. the Centers for Disease control current guidelines; and
 - b. the *MAXAIR protocol*.
 - c. In the event the negative pressure rooms at the infirmary are non-functioning inmates will be transferred to a facility with a negative pressure room.
- 11. An integral component of the infection control program is prevention of the occurrence and spread of infectious and communicable diseases. The Infection Control RN will ensure health care staff will proceed as follows:
 - a. offer ongoing education on communicable disease prevention to facility staff and inmates as part of the health education program;
 - b. maintain essential ongoing communication with the respective County Health Department and the Montana Department of Public Health and Human Services;
 - c. instruct facility employees on measures to prevent disease transmission, including additional
 precautions that may be necessary during transport, hospital supervision, or while in an
 infirmary; and
 - d. assure that continuity of care is established with appropriate community resources prior to releasing inmates who are diagnosed with communicable or infectious disease (*see HS E-13.0 Discharge Planning*).
- 12. The Infection Control RN will ensure staff report infectious and communicable diseases to the Montana Department of Public Health and Human Services and the Department's medical director or designee.
- 13. Health care staff will handle and treat bodily fluid exposure incidents and ensure employees use standard blood and body fluid precautions when providing inmate care in accordance with *DOC* 1.3.35, *Bloodborne Pathogen Exposure Control Plan & Hepatitis B Immunization* and *HS B-01.2 Bloodborne Pathogens*.
- 14. Health care staff will dispose of medical sharps and biohazardous waste using methods and materials that are in compliance with Environmental Protection Agency standards.
- 15. Inmate workers who are required to assist with disposal of biohazardous waste will be properly trained by Correctional Health Service Technicians (CHST) and/or designated nurses with the oversight of the Infection Control RN as stipulated in the inmate worker assignment description. The Infection Control RN will coordinate with the MSP warehouse for the proper disposal of biohazardous waste utilizing resources available in local communities.
- 16. The Infection Control RN will ensure that contaminated non-disposable medical equipment is decontaminated using appropriate methods as specified by the manufacturer, OSHA guidelines, and *HS B-01.5*, *Decontamination of Medical Equipment*.
- 17. The CHSTs will ensure the Infirmary kitchen and food storage area is kept clean and sanitary for preparing and serving meals. Food handlers will follow hygienic practices and must be

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medically cleared to avoid contamination of others in accordance with HS B-01.7, Infirmary Food Service Sanitation.

- 18. The MSP Continuous Quality Improvement committee will function as the Infection Control Committee will proceed as follows:
 - a. the Infection Control RN will report to the committee and issues will be addressed at the meeting;
 - b. the Infection Control RN will report facility-wide infection control issues at the monthly MSP Safety Committee meeting; and
 - c. the Infection Control RN will keep, and maintain on file, all committee meeting notes.

IV. CLOSING

Questions concerning this operational procedure will be directed to the Health Services Manager.

V. ATTACHMENTS

none